

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BH	70385	
O.I.P.E. CLASSIFIER		48	8/11/00
FORMALITY REVIEW	GS	804	09/12/00
RESPONSE FORMALITY REVIEW	M.H.	625	12-10-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date	
Final	Original	
1	✓	
3		✓
4		✓
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Claim	Date	
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Claim	Date	
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If more than 150 claims or 10 actions
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Form PTO-436A
(Rev. 6/99)